

<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) <b>740105-78</b>	
<b>CERTIFICATE OF MAILING OR TRANSMISSION</b> (37 CFR 1.18a)  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop A/F, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 872-9806, on <u>June 2, 2004</u> .  Signature: <u><i>[Signature]</i></u> Name: <u>K. M. McManus</u>		In re Application of <b>Gerd M. MÜLLER et al.</b>  Application Number <b>09/938,533</b> Filed <b>08/27/2001</b>  For <b>AT LEAST PARTIALLY IMPLANTABLE HEARING SYSTEM</b>  Group Art Unit <b>3736</b> Examiner <b>J. M. Foreman</b>	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 1.17(b))		<b>\$330.00</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ _____	
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 19-2380(740105-78). I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the			
<input type="checkbox"/> applicant/inventor.		<u><i>[Signature]</i></u> Signature	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
<input checked="" type="checkbox"/> attorney or agent of record		<u>David S. Saffran</u> Typed or printed name	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____		<u>June 2, 2004</u> Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
<input type="checkbox"/> *Total of _____ forms are submitted.			

NVA297242.1

PAGE 3/16 \* RCVD AT 6/2/2004 11:37:18 AM [Eastern Daylight Time] \* GVR:USPTO-EPXRF-1/2 \* DND:8726308 \* CSD:20040602113425800738 \* DURATION (mm:ss):08-00

07/01/2004 BDENNY 00000004 192380 09938533

01 FC:1401 330.00 DA